PTO/SB/06 (12-04)

Approved for use through 7/31/2008, OMB 0651-0032
U.S. Petent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

_		(IEMI)	IFFLIC				ERMINATIO	octive	December	8, 2004		10	6/52	Number 77	•
		APPLICA		AS FIL	.ED - P		column 2)		SMALL	. ENTIT	Y	OR	OTHE SMAL	R THAN L ENTITY	
_	FOR		NUMBE	ERFLEC		NUME	BER EXTRA		RATE (1)	FEE	(6)	•	RATE (\$)	FEE	/31
BASIC FEE (37 CFR 1.18(a), (b), or (c))		or (c))	ý	NA		. N/A		1 [NA	150		•	NA	300.0	_
SEARCH FEE 37 CFR 1 16(N, (1), or (m))			· N/A			N/A.		1 /	· N/A	\$2	50		ŅĄ	\$500	
XAMINATION FEE 37 CFR 1.16(d), (p), or (q))		E	N/A			1 N/A		1 h	N/A	\$10			N/A	\$200	
TOTAL CLAIMS		~ (V)						 	X\$ 25 .	+			X\$50 .	1200	
(37 OFR 1.16(i)) INDEPENDENT CLAIMS		AIMS	minus 20 a.					F	X100 _	+	 	OR	X200		
7	OFR 1.16(h))	·	the spec	minus		winás	exceed 100			 			~~~	-	
APPLICATION SIZE FEE (37 CFR 1, 16(6))		E 81 15 80	sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).												
u	TIPLE DEPEN						A		+180=				+360=	+	'
_	he dillerence in							.	TOTAL	† ·			TOTAL	1	<u> </u>
	•		•				•				J		IOIAL	<u> </u>	
	APP	LICAȚIO	 	WĖMD	'EU ~ P	MK 1. 11			-	•	•	•	ATUP	i D Tuess	
_		/ (Column			سنسب	mn 2) :	(Column 3)		SMALL	ENTITY		OR		R THAN ENTITY	
	1	/ CLAII			HIGH		PRESENT				Į.				
	2/27/	REMAIL AFTE	R		PREVIO PAID	OUSLY FOR	EXTRA		RATE (\$)	TION FEE	AL	•	RATE (\$)	TION	VL.
	7 (7) (Total (3) (2) (7) (7)	AFTE	MENT	Minus	PREVIC	OUSLY FOR		>	(\$ 25		AL (\$)	⊃R	X\$50 _		VL.
		AFTE	MENT	Minus Minus	PREVIO	OUSLY FOR	EXTRA	-		TION	AL (\$)	OR .	Y\$50	TION	VL.
	(37 CFR 1/10(i)) Independent	AFTE AMENDA	MENT	Minus.	PREVIO	OUSLY FOR	EXTRA	-	(\$ 25	TION	AL (\$)	OR .	X\$50 _	TION	VL.
	(37 CFR 1,16(i)) Independent (37 CFR 1,16(ii))	AFTE AMENDI / (20 Fee (37 C	MENT CFR 1.16(Minus. (s))	PREVIOUS PAID	OUSLY FOR	EXTRA		(\$ 25	TION	AL (5)		X\$50 _	TION	VL.
	independent (27 CFR 1.18(1)) Application St	AFTE AMENDI / (20 Fee (37 C	MENT CFR 1.16(Minus. (s))	PREVIOUS PAID	OUSLY FOR	EXTRA		(\$ 25	TION	AL (5)	OR .	X\$50 _ X200 _	TION	VL.
	independent (27 CFR 1.18(1)) Application St	AFTE PAMENDA Zee Fee (37 C) TATION OF M	CFR 1.16(Minus. (s))	PREVIO	OUSLY FOR (37 CF	EXTRA		X\$ 25	TION	AL (5)	OR OR	X\$50 = X200 = +360=	TION	VL.
	independent (27 CFR 1.18(1)) Application St	AFTE PAMENDA (2) 229 Fee (37 C	ER MENT EFR 1.16() ILLITIPLE () IS IS ING R	Minus. (s))	PREVIO	(37 CF	EXTRA = = R 1.16@)		X\$ 25	ADDO	AL (5)	OR OR	X\$50 = X200 = +360=	ADDI-	2. 2.
	independent (27 CFR 1.18(1)) Application St	Column CLAIM REMAIN AFTE	ER MENT CFR 1.16(ILLITIPLE (ILLITIPLE (ILLITIPLE (ILLITIPLE (ILLITIPLE (ILLITIPLE (ILLITIPLE (ILLITIPLE (ILLITIPLE (ILLITIPLE (ILLITIPLE (ILLITIPLE (ILLITIPLE (ILLITIPLE (ILLITIPLE (ILLITIPLE	Minus. (s))	PREVIO PAID	(37 CF	EXTRA = = R 1.16(1) (Column 3) PRESENT	7	(\$ 25 X100 + 180= TOTAL DOU FEE	TION FEE	AL (5)	DR DR	X\$50 = X200 = +360= TOTAL ADD'L FEE RATE (\$)	LOGO ADDI	2. 2.
	profit (190) Independent (27 of R 1,100) Application State PRESENT	Column CLAIM REMAIN AFTE	FR 1.16(Minus. (s)) DEPENDE	Column (Column Higher NUMB PREVIO) PAID F	(37 CF	EXTRA = R 1.16(1) (Column 3) PRESENT EXTRA		(\$ 25 X100 180= TOTAL ODU FEE RATE (\$) X\$ 25 X100	ADDO	AL (5)	OR OR	X\$50 = X200 = +360= TOTAL ADD'L FEE RATE (\$)	ADDI-	2. 2.
	par CFR 1.18(1) Independent (27 CFR 1.18(1)) Application Sta FIRST PRESENT Total (27 CFR 1.18(1)) Independent	Column CLAIN REMAIN AFTE AMENDA	FR 1.16(Minus S)) DEPENDE Minus Vinus	(Columnia (Colum	(37 CF	EXTRA To Column 3) PRESENT EXTRA		(\$ 25 X100 180= TOTAL DOU FEE RATE (\$)	ADDO	AL (5)	DR DR DR	X\$50 = X200 = +360= TOTAL ADD'L FEE RATE (\$)	ADDI-	2. 2.
	Total (27 CFR 1.18(1)) Independent (27 CFR 1.18(1)) Application St FIRST PRESENT Total (27 CFR 1.18(1)) Independent (27 CFR 1.18(1))	(Column CLAIM REMAIN AFTE AMENDM	ER MENT EFR 1.16(ILLITIPLE (ILLITIPLE (ILLITIPLE (ILLITIPLE (ILLITIPLE (ILLITIPLE (ILLITIPLE (ILLITIPLE (ILLITIPLE (ILLITIPLE (ILLITIPLE (ILLITIPLE (ILLITIPLE (ILLITIPLE (ILLITIPLE (ILLITIPLE	Minus. S)) DEPENDE Minus. Winus.	Column (Column Higher NUMB PREVIO) PAID F	(37 CF	EXTRA = R 1.16(1) (Column 3) PRESENT EXTRA =	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	(\$ 25 X100 180= TOTAL ODU FEE RATE (\$) X\$ 25 X100	ADDO	AL (5)	DR DR DR	X\$50 = X200 = +360= TOTAL ADD'L FEE RATE (\$)	ADDI-	2. 2.

The Highest Number Previously Peid For IN THIS SPACE is less than 3, enter 3.

The Highest Number Previously Peid For (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to completely including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.